PTO/SB/22 (04-07)
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PETITION	FOR EXTENSION OF TIME UNDER	Docket Number (Optional)					
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			1550.36US03 (109880)				
	Number 10/822,548	2005 (H.R. 4818).)	Filed 04/12/2004				
For Hand-held microwave polymerization system for dentistry							
Art Unit 17.		Examiner Butler, Patrick					
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
		Fee	Small Entity Fee				
	One month (37 CFR 1.17(a)(1))	\$120	\$60	S			
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	s			
x	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 510.00			
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	s			
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	s			
x Applicant claims small entity status. See 37 CFR 1.27.							
A check in the amount of the fee is enclosed.							
Payment by credit card. Form PTO-2038 is attached.							
The Director has already been authorized to charge fees in this application to a Deposit Account.							
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0937 I have enclosed a duplicate copy of this sheet.							
WARNIN	IG: Information on this form may become pu	blic. Credit card informa	•				
Provide credit card information and authorization on PTO-2038.							
I am the	applicant/inventor.						
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).							
attomey or agent of record. Registration Number							
	x attorney or agent under 37 CFF Registration number if acting under		16				
Michael A. Bondi 612-632-3309							
	Typed or printed name		Telephone Number				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Total o		submitted.					

INTINS AND SOURCHMENT.

INTINS FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Muchael Proph August 23, 2007							
Signafure Date							
Michael A. Bondi			612-632-3309				
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Total of forms are submitted.  Its collection of information is required by 37 CFR 1.138(a). The information is required to obtain or retain a bonefit by the public which is to file (and by the							

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